

HEALTH & WELFARE

C. L. "BUTCH" OTTER - Governor RICHARD M. ARMSTRONG - Director

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October 10, 2007

Kim Dahlman Lost Rivers Hospice 551 Highland Drive Arco, Idaho 83213

Provider #131548

Dear Mr. Dahlman:

On August 7, 2007, a Complaint Investigation was conducted at Lost Rivers Hospice. The complaint allegations, findings, and conclusions are as follows:

Complaint #ID00003048

Allegation #1: Patients who are on hospice are not appropriate for hospice care because they are not terminal.

Findings:

An unannounced visit was made to the hospice on 8/6 and 8/7/07. Five clinical records were reviewed. Four patients were interviewed. Interviews were also conducted with the hospice nurse and social worker, and the Hospice Medical Director. A visit was made to an Assisted Living Facility (ALF) where hospice patients resided. The ALF administrator was also interviewed. Of the six patients whose appropriateness for hospice was questioned, two had died and one had been discharged from hospice. Of the five cases of current patients, whose records were reviewed, all of these patients appeared to be appropriate for hospice care. The Hospice Medical Director had criteria to determine the six month prognosis and personally examined all hospice patients. No deficiencies were cited.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

Allegation #2: Hospice personnel are duplicating services for patients who reside in an ALF. Staff are not providing appropriate services to patients.

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Findings:

Five clinical records of hospice patients were reviewed. All records contained a needs assessment and contained plans of care outlining services to meet those needs. Services provided were appropriate to the needs of patients. Services documented for three patients who resided in an ALF were appropriate to meet their needs. Hospice services, both personal and professional, are designed to supplement the care provided in home settings, whether they are provided in individual homes or in an ALF. For patients residing in the ALF, the hospice had developed a plan of services to be provided by the ALF and services to be provided by the hospice. The ALF Administrator, a current patient, and a former patient were interviewed at the ALF on the afternoon of 8/6/07. All three persons stated they felt the care provided by the hospice was appropriate. No deficiencies were cited.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

Allegation #3: Hospice nurses were not available on-call to patients in Challis, Idaho.

Findings:

The hospice nurse for Challis was interviewed on 8/6/07 at 3:30 PM. She stated she lived in Challis and was available on call there. She stated that there could be a delay if she was not available, as a nurse would have to come from Arco, Idaho, approximately 80 miles away.

The administrator at an Assisted Living Facility in Challis, which had 3 hospice patients, was interviewed on 8/6/07 at 3 PM. She stated she did not know of instances where a nurse failed to come when needed. No deficiencies were cited.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

Allegation #4: A patient wanted to revoke hospice but was intimidated into keeping the service.

Findings: Two patients were interviewed at an Assisted Living Facility on the afternoon of 8/6/07. Both patients stated they appreciated the hospice services and were pleased with their care. One of these patients had recently revoked his hospice benefit. He stated he had thought about revoking hospice for a while but said the hospice social worker had talked him out of it at first. He stated she presented him with reasons to stay and he had stayed. He stated he did not feel intimidated by hospice staff.

Conclusion: Unsubstantiated. Lack of sufficient evidence.

Allegation #5: Hospice staff had forged a physician's name on a patient's hospice certification.

Findings: Certifications for the 5 patients whose records were reviewed were in order. The physician whose name had allegedly been used was not available for interview during the survey. No evidence of impropriety in relation to certifying patients was present.

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Conclusion: Unsubstantiated. Lack of sufficient evidence.

As none of the complaints were substantiated, no response is necessary. Thank you for the courtesies and assistance extended to us during our visit.

Sincerely,

GARY GÜILES

Health Facility Surveyor

Non-Long Term Care

SYLVIA CRESWELL

Co-Supervisor

Non-Long Term Care

GG/mlw